2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 23, 2002 8:00 AM
Secretary of State

DOCUMENT# 752409

Entity Name: NORTHBROOK VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

143 NORTHBROOK LANE
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

131 NORTHBROOK LANE
ORMOND BEACH, FL 32174 US

Current Mailing Address:

POST OFFICE BOX 5071
ORMOND BEACH, FL 32174 US

New Mailing Address:

POST OFFICE BOX 5071
ORMOND BEACH, FL 32175 US

FEI Number: 59-2071088 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LONGO, JOE
131 NORTHBROOK LANE
ORMOND BEACH, FL 32174

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	LONGO, JOE	
Address:	131 NORTHBROOK LANE	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	T	( ) Delete
Name:	HAMPTON, PAMELA	
Address:	104 NORTHBROOK LANE	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	V	( ) Delete
Name:	MCCRAY, ROBERTA	
Address:	114 NORTHBROOK LANE	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	D	( ) Delete
Name:	THOMPSON, JENNIFER	
Address:	165 NORTHBROOK LANE	
City-St-Zip:	ORMOND BEACH, FL 32174	
Title:	D	( ) Delete
Name:	LONGO, CAROL	
Address:	131 NORTHBROOK LANE	
City-St-Zip:	ORMOND BCH, FL 32174	
Title:		( ) Delete
Name:		
Address:		
City-St-Zip:		

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	BARTHOLOMEW, DONNA	
Address:	115 NORTHBROOK LANE	
City-St-Zip:	ORMOND BCH, FL 32174	
Title:	D	( ) Change (X) Addition
Name:	MOON, NANCY	
Address:	155 NORTHBROOK LANE	
City-St-Zip:	ORMOND BEACH, FL 32174	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOE LONGO P 02/23/2002
Electronic Signature of Signing Officer or Director — Date